

Application Form For Establishment of Learning Centre for General Courses



Mahatma Gandhi Antarrashtriya Hindi Vishwavidyalaya Directorate of Distance Education

Post - Hindi Vishwavidyalaya, Gandhi Hills, Wardha (Maharashtra) 442 0015 (India)

Tel. : +91-7152-247146, 251613

E-mail : ddemgahv@gmail.com, Website : www.hindivishwa.org

Application Number :
(To be filled by MGAHV)

Note : 1. Kindly ensure that your institution fulfills all the requirements as stated in the Guidelines for establishment of learning centre.
2. This form has to be full filled by Head of the learning centre.

1. Detail of Processing fee paid

DD No. ----- Date ----- Amount -----
Issuing Bank and Branch -----
Transaction ID (Incase of online/NEFT payment) -----

A) Institutional Information :

2. Trust/Society Detail/
Government Institution

1. Trust/Society/Registration no. : -----
2. Name of Trust/Society's/Govt. Institution : -----

3. Whether enclosed copy of bylaws : -----
4. Whether enclosed list of office bearer of trust/society with there address, contact no: -----

5. Copy of resolution passed by management/executive body of Trust/Society to offer MGAHV Distance Courses : -----

6. Whether enclosed Audit Report of last three years : -----

7. Trust/Society----- TAN No. -----and PAN No. -----
8. Contact no. -----Fax. -----E-mail-----

3. Name and Address of
Applicant
Institution/College

Address : -----

District : ----- State : ----- Pin Code : -----
PAN No. -----TAN No. -----
Mobile No. ----- E-mail : -----

4. Affiliation/Recognition
Details of Applicant
Institution/College
(Enclose the copy of affiliation /
recognition letter)

Name of Affiliating University : -----
Letter/Order No. : ----- Date : -----
(From -----to-----) (Copy of Affiliation to be
enclosed)
Recognized Courses : (If necessary attach separate list) -----

5. Name of the Head of
applicant
Institution/College

Name : -----Designation : -----
Qualification : -----

Principal/Head Details (Attached Photo ID Proof)	Date of Joining : ----- Date of Superannuation : ----- Contact no.: -----Fax.: -----E-mail : -----																																																	
6. Name of coordinator for ODL Programme of Institution/College (Attached Photo ID Proof) Who is supposed to co- ordinate ODL programme	Name : -----Designation : ----- Qualification : ----- Date of Joining : ----- Date of Superannuation : ----- Contact no. : -----E-mail : -----Mob. No. : -----																																																	
7. Rating / Certification of Host Institution (Enclose Certificate)	<table border="0"> <tr> <td>NAAC</td> <td><input type="text"/></td> <td>Date</td> <td><table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table></td> </tr> <tr> <td>NBA</td> <td><input type="text"/></td> <td>Date</td> <td><table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table></td> </tr> <tr> <td>ISO</td> <td><input type="text"/></td> <td>Date</td> <td><table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table></td> </tr> <tr> <td>Any Other (Specify)</td> <td><input type="text"/></td> <td>Date</td> <td><table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table></td> </tr> </table>		NAAC	<input type="text"/>	Date	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	NBA	<input type="text"/>	Date	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	ISO	<input type="text"/>	Date	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	Any Other (Specify)	<input type="text"/>	Date	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
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B) Academic Details : Regular Courses

1. Current Course Details	Regular Courses offering	Recognised by	Deate of Commencement	No of Student last 3 years	
	UG				
	PG				
	Diploma				
	PG Diploma				
2. Teaching/Academic Staff Details	Courses	Name of Teachers	Date of Joining	Qualification	Please attached updated CV
UG					
PG					
Diploma					
PG Diploma					

C) Infrastructure Details :**1) Details of land :**

1. Name of owner of land, address, contact no. : -----
2. Whether enclosed land record such as 7/12 or property ownership document ? -----
3. Whether building is map sanctioned by competent authority ? (if yes, please enclose sanctioned xerox copy of building map)
4. Whether land is on lease ? : (Please enclose lease agreement document & copy of sanctioned building map if any)

2) Part – 3 Information regarding programmes offered through distance mode from other Universities.

1. Programmed offered by applicant institution/college through distance mode at present	Courses	Recognised from which university institution	Recognition detail		No of Student last 3 years		
			From	To			
	UG						
	PG						
	Diploma						
2. Teaching/Academic Staff for Programmes offered by applicant institution/college through distance mode at present (Specially for distance education) (Please attach updated Resume in the prescribed format along with Photo ID proof)	PG Diploma						
	Diploma						
	PG						
	UG						
	PG						
	Diploma						
	PG Diploma						
	Diploma						
	PG						

Please attached appointment letter for all teaching/academic staff

3) Details of Administrative Staff (If required, attach separate sheet) :

Name	Designation	Parmentent or Constructural	Date of Joining

4) Library Details :

(Area)

- i. Total number of Text Books :
- ii. Total number of Reference Books :
- iii. Total number of Journals and Periodicals :
- iv. Number of Newspapers Subscribed :
- v. Total number of E-books/Course CD :
- vi. Internet Facility : Yes / No.

D) Connectivity :

Nearest Airport : ----- Distance (in KM) -----

Nearest Railway Station : ----- Distance (in KM) -----

Nearest Bus Stand : ----- Distance (in KM) -----

1) Details of Infrastructural Facilities required as per UGC-DEB norms :

Sr. No.	Built up Area Type	Precentgae (%)	Built up Area Type (Carpet Area, in sq ft)
1	Academic	50%	7500
2	Administrative	10%	1500
3	Academic support such as Library, Reading room, Computer Centre, Informational and Communication technology Labs, Video and Audio Labs etc.	30%	4500
4	Amenities or other support facilities	10%	1500
Total			15000

2) Infrastructure available at applicant institution/college (Enclosed Building Map) :

Sr. No.	Built up Area Type	Precentgae (%)	Built up Area Type (Carpet Area, in sq ft)
1	Academic		
2	Administrative		
3	Academic support such as Library, Reading room, Computer Centre, Informational and Communication technology Labs, Video and Audio Labs etc.		
4	Amenities or other support facilities		
Total			

3) Part – 4 Information regarding distance programmes for which applicant institution/college applied for

1. Details of MGAHV Academic programmes which applicant institution/college applied for	Courses	Name of Proposed course co-ordinator	Qualification Teaching Experience (in Years)	Nature of appointment (Permanent/Contract)	Please attached resume & document of all teaching/academic staff
	UG				
	PG				
	Diploma				
	PG Diploma				

Declaration

I hereby declare that all the information given above is correct to the best of my knowledge and belief.

Place :

Date :

Signature :

Name :

(Head of the Institution)

Seal of the applicant instituion

